



EGCG: RECENT FORMULATION DEVELOPMENTS, CHALLENGES AND OPPORTUNITIES

Balwan Singh^{1,2*}, Sanju Nanda², Noopur Srivastava³, Kamini Kalia⁴,
K. Nagarajan¹

¹KIET School of Pharmacy, KIET Group of Institutions, Delhi-NCR, Ghaziabad, UP, India-201206.

²Department of Pharmaceutical Sciences, Maharshi Dayanand University, Rohtak, Haryana-India-124001.

³The Oxford College of Pharmacy, Bangalore, Karnataka-560068.

⁴ABESIT College of Pharmacy, ABESIT Group of Institutions, Ghaziabad, UP -201009.

scorpiobalwan@gmail.com

Abstract: Epigallocatechin gallate (EGCG) is an herbal source of medicine for treating cancers, with minimal side effects, moreover the outcomes of the drug is directly affected by the various physicochemical characteristic. This parameter attracted the drug discovery scientist to find the way to enhance the effects. The review covers all important finding related to the therapeutics effects of the EGCG, the focus of the review was to highlighted the importance of the advanced drug delivery system which are recent advancement in delivery system such as nanotechnology, and liposomes, which enhances the therapeutic effects and chemo preventive actions of EGCH, The nanotechnology gives various advantages, such as low skin irritation and increased protection of encapsulated drug for topical applications in non melanoma skin cancer enhances drug penetration through skin. In the present data collection, some of the important clinical data is incorporated to analyze the actual drug effect in the human population. The review is the combination of the recent data related EGCG.

INTRODUCTION:

Plants, microbe's, animals and marine life all comes under natural sources, out of which plants are the most utilized natural resource used for applications in the pharmaceutical science.¹The accessibility and abundance of the compounds still comprises of the major natural source for new drugs.² EGCG is the biologically active catechin found in green tea and studied as one of the most chemopreventive compound. epigallocatechin gallate (EGCG) can be synthesized from fully green and facile redox chemistry involving reduction of colloidal iron hydroxide (Fe(OH)₃) through green tea (GT) polyphenols produced water-soluble Fe₃O₄ nanocrystals coated with GT extracts.³Epigallocatechin-3-gallate (EGCG)is a major polyphenol of Green tea⁴.

Epigallocatechin gallate can also be define as the one of the most popular green tea extract produced from its leaves Camellia sinensis, which is having great potential and a healthy beverage consumed worldwide.⁵ Epigallocatechin gallate (EGCG) is a potent polyphenolic phytochemical antioxidant green tea extract, use in the topical formulations for prevention of skin cancer.⁶ It offers various advantages over conventional therapies because of its widely availability and cheap method to isolate from green tea.⁷ Other advantages are it has health-promoting effects such as antioxidation, anti-inflammation and anti-cancer activities can be orally administered and acceptable safety profile interest.⁸ Used widely clinically and pharmaceuticals because of its short half-life, low stability and low bioavailability and enormous potential as an anti-cancer agent. EGCG as Apoptosis promoter, used in the recent advances as the cellular and molecular levels of carcinogenesis which led to the development of promising strategies for the chemoprevention of cancers and acts as a natural compounds

active against skin cancer (Dietary components, phytochemicals and crude extracts).⁹ There are various advantages of EGCG used as a cancer preventive agent that are its safety, low cost and bioavailability. Glycerin-based vehicles are suitable for stabilizing EGCG, minimized immunogenicity and side-effects.¹⁰

Epigallocatechin gallate considered as potent phytochemical majorly used for the treatment of skin cancer. i.e., basal cell carcinoma (BCC) and squamous cell carcinoma (SCC), which are type of nonmelanoma skin cancers.¹¹ Basal cell carcinoma is the most common type of non-melanoma skin cancer, which constitutes about 75% of the cases. It is steadily increased and making it a major challenge in terms of management, cures and cost of public health.¹² There are various new formulation techniques comes in research for the treatment of increased nonmelanoma skin cancers.¹³ Topical administration of anticancer drugs is one of the interesting alternatives used to minimize side effects and increased its drug targeting and therapeutic benefits.¹⁴ The major challenge of this kind of treatment is to increase penetration of the drug to the skin sufficient levels to kill cancerous cells.¹⁵ To overcome skin barriers and to reach skin malignancies, number of techniques and formulations has been developed for successful favoring penetration of drug into the deep layers of the epidermis.¹⁶ Types of formulation that enhanced/focused the targeting of drug delivery are liposomes, lipid nanoparticles, solid lipid Nanoparticle, gold nanoparticle, polylactic acid–polyethylene glycol nanoparticles, Nanospheres, Nanoemulsion and Phytosomes.¹⁷ Physical method used to improve the drug penetration by topical means for anticancer effects are iontophoresis and electroporation. Herbal phytoconstituents attain greater therapeutic efficacy by using emerging drug delivery systems i.e. ¹⁸⁻¹⁹Nanoparticle which has applied to the vast majority EGCG works on decreasing the probability of cancer cell implantation rather than direct cancer cell cytotoxicity and also lowers the proteolytic activity.²⁰

EPIGALLOCATECHIN GALLATE (EGCG):

Source and Chemical Structure:

Epigallocatechin gallate, EGCG is a plant-based compound, originating from tea called catechin. Epigallocatechin gallate, which is a catechins content found higher in green tea compared to others and is further categorized into a larger group of plant compounds known as polyphenolic hydroxyl group.²¹ According to various reported studies epigallocatechin gallate found to be a beneficial antioxidative, anti-inflammatory and anticarcinogenic compound. EGCG is, with solubility in water (20°C) of 40 g/l, a soluble powder and sparingly good soluble powder in polar protic organic solvents like ethanol²²⁻²³ Epigallocatechin gallate is an organic compounds of polypropanoids, belongs to a class of flavanoids, which is a small molecule having chemical formula C₁₂H₁₈O₁₁ and monoisotopic average weight 458.3717.²⁴ Other properties are melting point 140-142°C. Its pharmacology acts as to inhibit cellular oxidation and prevents free radical damage to cells. Act as a potential cancer chemopreventive agent.²⁵

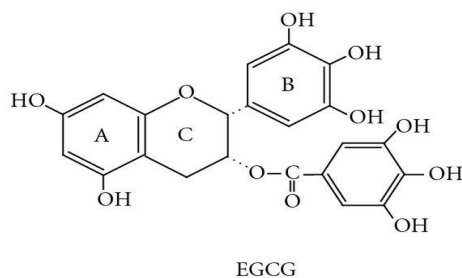


Fig 1: Structure of Epigallocatechin gallate

The main groups of flavonoids include flavonols/flavan-3-ols (catechins), mainly found in tea and their chemical structures are characterized by two benzene rings which are connected by a linear carbon chain and an aromatic chromophore. Camellia sinensis is rich source of Epigallocatechin-gallate, which is stable and water-soluble member of flavanoid group. EGCG is used in the treatment of cancer, because of its inducing apoptosis and cell cycle arrest property in melanoma cells (A374 and Hs-294T), either alone or in combination with other drugs.²⁵ EGCG also showed pro-apoptotic activity, which is only selective towards melanoma cells and not towards the normal melanocytes. Down regulation of apoptosis inhibits proteins by which EGCG exerts these effects as mechanism, or cell survival promoting proteins (Bcl-2, D1 and cyclin dependent kinase 2 (cdk2), the up regulation of Bcl-2 associated X protein (Bax), a pro-apoptosis protein, the activation of caspases-3, -7 and -9, and by the induction of tumor.²⁶ As per reported in vitro and in vivo studied on mice model treatment with a combination of EGCG and interferon, it was found that the synergistic anti-proliferative effects against human melanoma cells, which compelling the evidence related to the induction of DNA damage and high genetic mutation frequency in normal lung and skin cells by high concentrations of EGCG, which could possibly cause cancer.²⁷

Mechanism of Action:

EGCG plays an important role in lipid metabolism, where it directly interacts with plasma membrane proteins and phospholipids in whole body physiology as well as at the cellular level resulting stimulation of intracellular signaling pathways.²⁸ Epigallocatechin gallate mediates biological actions by entering to the intracellular compartments, cytosol, mitochondria, lysosome, and nucleus. EGCG's mechanisms of action involves Apoptotic pathways such as proteasome inhibition, which effects dependency on the, cell types, stress condition and concentration of EGCG.²⁹⁻³⁰ This inhibitory action mechanism of EGCG can be generalized to other membrane receptor proteins as well.³¹ Epigallocatechin gallate has been reported to inhibit the growth factor receptor phosphorylation, such as platelet-derived growth factor receptor, epidermal growth factor receptor, also responsible for the G0-G1 phase arrest, inhibit DNA methyltransferase activity and inhibit aberrant arachidonic acid metabolism.³² Other are inhibition of mitogen activation protein kinases, the activation of activator protein-1, and cell transformation.³³

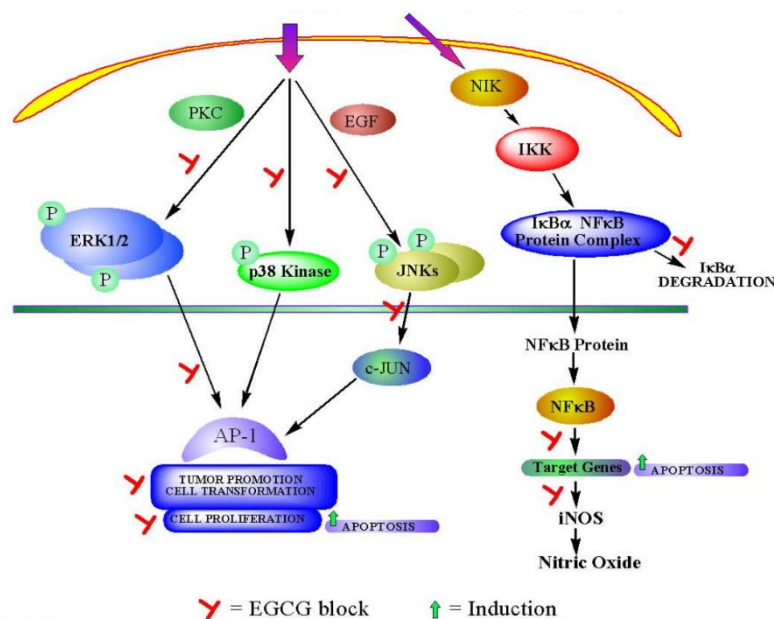


Fig 2: Cancer-related mechanism of EGCG³⁴

General Mechanism of action of EGCG for non melanoma skin cancer can be explain as an antioxidative, photoprotectant, inhibition of angiogenesis and induction of apoptosis is mainly promoted by polyphenols which regulate Bcl-2 family proteins result in activation of capase-3, while the down regulation of MMPs expression gives anti migratory effects.³⁵⁻³⁶

Formulation and Challenges:

EGCG is a multipotent anticancer agent, works as a promising molecule in the prevention and treatment of cancer, also offers new clues for discovering multiple-targeted anticancer drugs.³⁷ Formulation strategies for determining the development of antineoplastic natural compounds highlights the main challenges in the development of optimized drug delivery in anticancer field including all type of skin cancers. Factors limits their bioavailability are physicochemical properties of compounds and their solubility in water.³⁸

Ultra violet radiation (B) ranges from 290–320 nm, are mutagenic and carcinogenic in nature and responsible for a variety of skin disease.³⁹ These radiations induce oxidative stress, DNA damage, immunosuppression and skin cancers including the melanoma and nonmelanoma by penetrating inside epidermis of the skin.⁴⁰ There are various types of drug delivery system using EGCG as main drug component to treat cancer. Some are:⁴¹

Liposomes:

Liposomes consist primarily of phospholipid vesicles, which facilitates the encapsulation of both lipophilic and hydrophilic drugs with higher concentration and are biocompatible, colloidal particles and biodegradable as well.⁴¹ Which is most studied nanocarriers for the treatment of cancer. These vesicles are in turn composed of one or several lipid bilayers According to Fang and group liposome with EGCG for intratumoral delivery was most effective route to treat cancer cells by promoting good quantity of drug deposition at targeted site (neoplastic cells) to treat basal cell carcinoma in female mice.⁴²

Nano drug delivery:

Nanotechnology is an emerging drug delivery system to reach at the targeted site, which improves the therapeutic effectiveness and safety profile of conventional cancer chemotherapies.⁴³ Various types of nanoparticles have been developed for oral, IV and topical applications are solid lipid nanoparticles, polymeric nanoparticles, gold nanoparticles, β -lactoglobulin-based nanocomplexe, gelatin nanoparticle, PEG nanoparticles and nanospheres as well. These nanoparticles are reported to increase EGCG stability.⁴⁴

Table 1: Type of EGCG Formulations⁴⁵⁻⁴⁸

EGCG type of Formulation	Components	Method of application/route of administration	Remarks
Nanoparticles	Chitosan nanoparticles (EGCG encapsulated in chitosan nanoparticles)	Orally (enhance oral bioavailability)	Increased internal organ absorption
Nanoparticles	Polymeric nanoparticles (EGCG into poly lactic co- glycolic acid)	Orally (intensified DNA damage level in dose dependent manner)	Increases EGCG stability and drug release rate
Gold nanoparticles	T-AUNP loaded with Phytochemical EGCG prepared by ultrasonication method	Oral, Intratumoral and interperitoneal injection	Shows five folds higher effective to apoptosis compare to non encapsulated EGCG

Liposomes	Catechin and EGCG in soy phospholipid liposomes	Topical and intratumoral	Higher potency and yield achieved by incorporating EGCG in vesicular structure
Phytosomes	Catechin loaded nano phytosomes	Topically and orally (Better bioavailability, entrapment efficiency)	Phospholipids concentration and addition rate impact on particle size and encapsulation efficiency
Protein based nanoparticle	Oligomer of EGCG, encapsulated drug and protein PEG and EGCG form shell of this	Orally (Boosts cancer efficacy when used with protein drugs)	By these two folds drug accumulated in cancer cells
Nanocarriers	β -Lactoglobulin-chlorogenicacid with EGCG	-	Enhanced EGCG stability in physiological environments. Controlled release in simulated gastric and intestinal environments
Nanocarriers	Gelation coated EGCG	Ocular	Inhibition of HUVECs proliferation and migration. Inhibition of vessel formation in a corneal neovascularization
Nanocarriers	Peptidedendrimers (glycine, proline, lysine, and arginine)	Topical	Enhance the ex-vivo permeation of EGCG
Polymeric nanoparticles	PLGA and PEG	Intravenous	Cultured cancerous cell growth inhibition
Liposomes	Egglecithin and cholesterol	Topical	Enhanced anti MRSA activity
Liposomes	Sorbitan monostearate and cholesterol	Oral	Enhances the cellular permeability in caco 2 cell monolayer

Phytosome:

It is a type of vesicular drug delivery system. It is reported by the manufacturer to increase the bioavailability of EGCG in humans.

Bioavailability and Stability Challenges of EGCG: As Therapeutic Agent:

EGCG as a therapeutic agent develops so many challenges, out of which bioavailability and stability are two main factors. As EGCG belongs to the class 3 compounds according to BCS classification, which is having a dose of 50-300 mg, a highly soluble but low permeable drug with an apparent permeability coefficient. In organic solvents, EGCG degradation is reduced due to the lack of dissociation and proton-transfer possibilities while some organic solvents

like diethylene glycol monoethyl ether and glycerin are options to increase EGCG stability. Factors affecting bioavailability of EGCG are due to:⁴⁹

- Cellular uptake is very low due to its highly aqueous solubility and low hydrophobicity to cross cell membrane
- EGCG instability in alkaline or neutral condition
- metabolic transformations e.g., Methylation, Glucuronidation and Sulfation
- Multidrug Resistance Associated Protein causes active efflux effect of many polyphenolic compounds

The extent of bioavailability also depends on the route of administration and organ target site.⁵⁰

EGCG in Non-Melanoma Skin Cancer:

Approximately 1.5–2.0 m² surface area of body comprises of skin; which is the largest part of body. Skin consists of various functions such as to regulate body temperature, protects body against infections and also Skin is a physical barrier between the external environment and internal tissues thus provides a protective covering to crucial interface between inside and outside and also protect internal organs of the body against the detrimental effects of environmental and xenobiotic agents.⁵¹

Non-melanoma skin cancer also known as Metastatic or advanced skin cancer. Skin cancer is major public health problem and considered equivalent to all other cancer like other organs combined. Skin cancer is categorized as melanoma and non-melanoma. Major etiologic factor for initiation of skin cancers is the chronic exposure of the skin to solar ultraviolet (UV) radiation.⁵² It is important to protect skin from UVA and UVB both radiations for prevention of non melanoma skin cancer. Chemopreventive agents are developed to address this type of issues and disease on urgent basis.⁵³ Use of polyphenols, EGCG, obtained from green tea is one such strategy becoming popular as a means to protect the skin diseases including the risk of skin cancer. These possess health effects, organs as well as in general health. Nonmelanoma skin cancers further classified as basal cell carcinoma and squamous cell carcinoma, which are common neoplasms worldwide and are the most common cancers in the United States. EGCG is believed to act as a scavenger of reactive oxygen species and may augment the native antioxidant defense mechanisms of the cell.⁵⁴

EGCG induces tumor cell death via several mechanisms i.e caspase-independent apoptosis, lysosomal membrane permeabilization-mediated cell death, caspase-dependent apoptosis and autophagy. It also inhibits migration and penetration of tumour. As Chemopreventive agent dose of EGCG should be high.⁵⁵

According to Mittal A and group it was reported that long term topical application of EGCG results in high protection against photocarcinogenesis and EGCG also enhance the penetration or absorption capacity inside the skin layers when given in higher concentration.⁵⁶

There are various topical therapies for skin cancer treatment, but comes with the major problem of penetration, the drugs penetrate into the skin by three different routes are:⁵⁷

- Stratum corneum between the corneocytes
- Intracellular route i.e cells and the intervening lipids
- Through hair follicles and sweat glands

So, while making topical application penetration and deposition of drug into skin is major factor, to improve it various approaches are being developed which is as follows:⁵⁸

- **Chemical Enhancers:** Chemicals added with formulation. Fatty acids, oleic acid, azone, dimethyl sulfoxide (DMSO) and terpenes, Propylene glycol, ethanol etc.
- **Physical enhancers by means of electric application:** Iontophoresis, Sonophoresis and Electroporation

- **Advance formulations:** Different type of nanoparticles i.e solid lipid, polymeric, gold, protein and Liposomes.

Future Opportunity:

EGCG is an herbal source of medicine for treating cancers, having less side-effects and toxicity compared to other drugs used, but there are various factors which we cannot ignore while using are its poor absorption, high dose needed for better results. So EGCG holds a great promise for future clinical applications. There is need to focus on the chemical stability of EGCG within the dosage form and methods to enhance the bioavailability of EGCG. For non melanoma Skin cancers its major challenge is to penetrate drug by topical means because of hydrophobic nature of stratum corneum, upper layer of the skin, vehicles required for penetration of drug molecules. As the limited preclinical data and clinical data available in the literature to cure skin cancer by botanical means surgical therapy is the preferred mode of treatment for high-risk Non melanin skin cancer. New methods of prevention need to be developed for non melanoma skin cancer, which is a significant human disease.

Conclusions:

End of several steps of cellular growth lesions namely, dysplasia, metaplasia, hyperplasia and neoplasia are cancer. EGCG is promising molecule and the major bioactive phytochemicals isolated from medicinal plants of green tea having many health benefits, anticancer activity is one of the important function of it. Also, EGCG, Inhibits of all the processes of carcinogen i.e initiation, promotion and progression and has ability to bind and modulate the activity of several signaling molecules related to mitosis, survival, and cellular death, moderating the cellular responses present in cancer.

Advanced drug delivery system which are recent advancement in delivery system such as nanotechnology, liposomes are developed to improve the therapeutic effects and chemo preventive actions of EGCH, holding great promise for future clinical applications. Nanotechnology gives various advantages, such as low skin irritation and increased protection of encapsulated drug for topical applications in non melanoma skin cancer enhances drug penetration through skin.

Reference:

1. Xiao, L.; Mertens, M.; Wortmann, L.; Kremer, S.; Valldor, M.; Lammers, T.; Kiessling, F.; Mathur, S. Enhanced in vitro and in vivo cellular imaging with green tea coated water-soluble iron oxide nanocrystals. *ACS Appl. Mater. Interfaces* 2015, 7, 6530–6540.
2. Singh, B.N.; Shankar, S.; Srivastava, R.K. Green tea catechin, Epigallocatechin-3-gallate (EGCG): Mechanisms, perspectives and clinical applications. *Biochem. Pharmacol.* 2011, 82, 1807–1821.
3. De Pace, R.C.C.; Liu, X.; Sun, M.; Nie, S.; Zhang, J.; Cai, Q.; Gao, W.; Pan, X.; Fan, Z. Wang, S. Anticancer activities of (–)-Epigallocatechin-3-gallate encapsulated nanoliposomes in MCF7 breast cancer cells. *J. Liposome Res.* 2013, 23, 187–196.
4. Nakagawa, K.; Okuda, S.; Miyazawa, T. Dose-dependent incorporation of tea catechins, (–)-Epigallocatechin-3-gallate and (–)-Epigallocatechin, into human plasma. *Biosci. Biotechnol. Biochem.* 1997, 61, 1981–1985.
5. Yamamoto, T.; Juneja, L.R.; Chu, sDjong-C.; Kim, M. *Chemistry and Applications of Green Tea*; CRC Press: Boca Raton, FL, USA, 1997.
6. Tawona N. Chinembiri, Lissinda H. du Plessis, Minja Gerber, Josias H. Hamman and Jeanetta du Plessis, Review of Natural Compounds for Potential Skin Cancer Treatment, *Molecules* 2014, 19, 11679–11721.

7. Baliga MS, Katiyar SK. *Photochem. Photobiol. Sci.* 2006; 5:243–253.
8. Katiyar S, Elmets CA, Katiyar SK. *J. Nutr. Biochem.* 2007; 18:287–296.
9. Meng Shi, Yun-Long Shi, Xu-Min Li, Rui Yang, Zhuo-Yu Cai, Qing-Sheng Li, Shi-Cheng Ma, Jian-Hui Ye, Jian-Liang Lu, Yue-Rong Liang, and Xin-Qiang Zheng, Food-grade Encapsulation Systems for (–)-Epigallocatechin Gallate, *Molecules*, Feb 2018; 23, 445
10. Cai, Y.; Zhang, J.; Chen, N.G.; Shi, Z.; Qiu, J.; He, C.; Chen, M. Recent advances in anticancer activities and drug delivery systems of tannins. *Med. Res. Rev.* 2017, 37, 665–701. 17.
11. Zhu, Q.Y.; Zhang, A.Q.; Tsang, D.; Huang, Y.; Chen, Z.Y. Stability of green tea catechins. *J. Agr. Food Chem.* 1997, 45, 4624–4628.
12. Thangapandian, S.; Miltonprabu, S. Epigallocatechin gallate effectively ameliorates fluoride-induced oxidative stress and DNA damage in the liver of rats. *Can. J. Physiol. Pharmacol.* 2013, 91, 528–537.
13. Andreia Granja, Iúri Frias, Ana Rute Neves, Marina Pinheiro, and Salette Reis, Therapeutic Potential of Epigallocatechin Gallate Nanodelivery Systems, *Biomed Res Int.* 2017; 2017
14. Zhou Y., Tang J., Du Y., Ding J., Liu J.-Y. The green tea polyphenol EGCG potentiates the antiproliferative activity of sunitinib in human cancer cells. *Tumor Biology.* 2016; 37(7):8555–8566.
15. Toden S., Tran H.-M., Tovar-Camargo O. A., Okugawa Y., Goel A. Epigallocatechin-3-gallate targets cancer stem-like cells and enhances 5-fluorouracil chemosensitivity in colorectal cancer. *Oncotarget.* 2016;7(13):16158–16171.
16. Rahmani A. H., Al Shabrmi F. M., Allemailem K. S., Aly S. M., Khan M. A. Implications of green tea and its constituents in the prevention of cancer via the modulation of cell signalling pathway. *BioMed Research International.* 2015;2015
17. Shankar S., Ganapathy S., Srivastava R. K. Green tea polyphenols: biology and therapeutic implications in cancer. *Frontiers in Bioscience.* 2007;12(13):4881–4899. doi: 10.2741/2435.
18. Yamauchi R., Sasaki K., Yoshida K. Identification of epigallocatechin-3-gallate in green tea polyphenols as a potent inducer of p53-dependent apoptosis in the human lung cancer cell line A549. *Toxicology in Vitro.* 2009;23(5):834–839.
19. Alam, M., Goldber, L. H., Silapunt, S., Gardner, E. S., Strom, S. S., Rademaker, A. W., Margolis, D. J. (2011). Delayed treatment and continued growth of nonmelanoma skin cancer. *Journal of American Academy Dermatology*, 2011, 64;5: 839-848,
20. Perrotta, E. R., Giordano, M., Malaguarnera, M. (2011). Non-melanoma skin cancers in elderly patients. *Critical Reviews in Oncology/Hematology*, 2011.
21. Guang-Jian Du, Zhiyu Zhang, Xiao-Dong Wen, Chunhao Yu, Tyler Calway, Chun-Su Yuan, and Chong-Zhi Wang, Epigallocatechin Gallate (EGCG) Is the Most Effective Cancer Chemopreventive Polyphenol in Green Tea, *Nutrients.* 2012 Nov; 4(11): 1679–1691
22. Chenyu Chu, Jia Deng, Yi Man and Yili Qu, Green Tea Extracts Epigallocatechin-3-gallate for Different Treatments, *BioMed Research International*, Aug 2017;2017:1-9.
23. <https://www.alzforum.org/therapeutics/epigallocatechin-gallate-egcg>
24. Samuel T. Saito, Albert Welzel, Edna S. Suyenaga, Francie Bueno, A method for fast determination of epigallocatechin gallate (EGCG), epicatechin (EC), catechin (C) and caffeine (CAF) in green tea using HPLC, *Food Science and Technology*, 2006, 26(2)
25. <https://www.drugbank.ca/drugs/DB12116>
26. <https://pubchem.ncbi.nlm.nih.gov/compound/Epigallocatechin-gallate#section=Computed-Properties>

27. <https://pubchem.ncbi.nlm.nih.gov/compound/Epigallocatechin-gallate>
28. Andrea Aquilato, Joseph M Wu, Polyphenols in the Prevention and Treatment of Vascular and Cardiac Disease, and Cancer, Polyphenols in Human Health and Disease, 2014
29. Zhe Hou, Shengmin Sang, Hui You, Mao-Jung Lee, Jungil Hong, Khew-Voon Chin, and Chung S. Yang, Mechanism of Action of (-)-Epigallocatechin-3-Gallate: Auto-oxidation-Dependent Inactivation of Epidermal Growth Factor Receptor and Direct Effects on Growth Inhibition in Human Esophageal Cancer KYSE 150 Cells, *Cancer Res* 2005; 65(17):8049-8056.
30. Chung JY, Park JO, Phyu H, Dong Z, Yang CS. Mechanisms of inhibition of the Ras-MAP kinase signaling pathway in 30.7b Ras 12 cells by tea polyphenols (-)-epigallocatechin-3-gallate and theaflavin-3,3V-digallate. *FASEB J* 2001;15:2022-4.
31. Fang MZ, Wang Y, Ai N, et al. Tea polyphenol (-)-epigallocatechin-3-gallate inhibits DNA methyltransferase and reactivates methylation-silenced genes in cancer cell lines. *Cancer Res* 2003; 63:7563-70.
32. Lee MJ, Lambert JD, Prabhu S, et al. Delivery of tea polyphenols to the oral cavity by green tea leaves and black tea extract. *Cancer Epidemiol Biomarkers Prev* 2004;13:132-7.
33. Liang YC, Lin-shiau SY, Chen CF, Lin JK. Suppression of extracellular signals and cell proliferation through EGF receptor binding by (-)-epigallocatechin gallate in human A431 epidermoid carcinoma cells. *J Cell Biochem* 1997; 67:55-65.
34. Danciu Corina, Soica Codruta, Antal Diana, Alexandra Popescu, Roxana Ghiulai, Ioana Zinuca Pavel, Stefana Avram, Minda Daliana and Cristina Dehelean, An Update On Natural Compounds and Their Modern Formulations for the Management of Malignant Melanoma, *Natural Products and Cancer Drug Discovery*, 2017.
35. Kelly E. Johnson and Traci A. Wilgus: Multiple Roles for VEGF in Non-Melanoma Skin Cancer: Angiogenesis and Beyond, *J Skin Cancer*. 2012; 2012: 483439.
36. Lei Chen 1, 2 and Hong-Yu Zhang, Cancer Preventive Mechanisms of the Green Tea Polyphenol (-)-Epigallocatechin-3-gallate, *Molecules* 2007, 12, 946-957.
37. Santosh K. Katiyar, Green tea prevents non-melanoma skin cancer by enhancing DNA repair, *Arch Biochem Biophys*. 2011 Apr; 508(2): 152-158
38. Jia-You Fang, Woan-Ruoh Lee, Effect of liposome encapsulation of tea catechins on their accumulation in basal cell carcinomas, *Journal of Dermatological Science*, 2006;42(2):101-9
39. Andreia Granja, Marina Pinheiro, Salette Reis, Epigallocatechin Gallate Nanodelivery Systems for Cancer Therapy, *Nutrients*. 2016 May; 8(5): 307.
40. Jillian W. Millsop, Raja K. Sivamani, and Nasim Fazel, Botanical Agents for the Treatment of Nonmelanoma Skin Cancer, *Dermatology Research and Practice*, 2013;2013:1-9.
41. Imtiaz Ahmad Siddiqui, Rohinton S. Tarapore & Hasan Mukhtar, Prevention of skin cancer by green tea: Past, present and future, 2009; *Cancer Biology & Therapy* 8:13, 1288-1291
42. Dag D, Oztop MH. Formation and characterization of green tea extract loaded liposomes. *J Food Sci* 2017;82:463-70
43. Tan S. Self Assembled Nanocomplexes Comprising of Green Tea Catechin Derivatives and Protein Drugs for Cancer Therapy. Ph.D Dissertation. London: Imperail College London; 2014
44. Rashidinejad A, Birch EJ, Sun-Waterhouse D, Everett DW. Delivery of green tea catechin and epigallocatechin gallate in liposomes incorporated into low-fat hard cheese. *Food Chem* 2014;156:176-83.

45. Hsieh DS, Wang H, Tan SW, Huang YH, Tsai CY, Yeh MK, et al. The treatment of bladder cancer in a mouse model by epigallocatechin-3gallate-gold nanoparticles. *Biomaterials* 2011;32:7633-40
46. Dube, A.; Ng, K.; Nicolazzo, J.A.; Larson, I. Effective use of reducing agents and nanoparticle encapsulation in stabilizing catechins in alkaline solution. *Food Chem.* 2010, 122, 662–667.
47. Jain,S.;Hirst,D.G.;O’Sullivan,J.M.Goldnanoparticlesasnovelagentsforcancertherapy. *Br. J.Radiol.* 2012, 85, 101–113
48. Siddiqui,I.A.;Adhami,V.M.;Ahmad,N.;Mukhtar,H.Nanochemoprevention: Sustainedreleaseofbioactive food components for cancer prevention. *Nutr. Cancer* 2010, 62, 883–890
49. Selvamuthukumar, S.; Velmurugan, R. Nanostructured lipid carriers: A potential drug carrier for cancer chemotherapy. *Lipids Health Dis.* 2012, 11, 159
50. R. Radhakrishnan, H. Kulhari, D. Pooja, S. Gudem, S. Bhargava, R. Shukla and R. Sistla, Encapsulation of biophenolic phytochemical EGCG within lipid nanoparticles enhances its stability and cytotoxicity against cancer, *Chem Phys Lipids*, 2016, 198, 51-60.
51. JavedIqbalBanzeer,AhsanAbbasi,RiazAhmad,RiffatBatool,TariqMahmood,BarkatAli, Ali TalhaKhalil,SobiaKanwal,SayedAfzalShah,MuhammadMaqsoodAlam,SheezaBashir, HussainBadshah,AkhtarMunirj, Potential phytochemicals in the fight against skin cancer: Current landscape and future perspectives, *Biomedicine & Pharmacotherapy*,2019;109: 1381-1393
52. S. K. Katiyar, “Green tea prevents non-melanoma skin cancer by enhancing DNA repair,” *Archives of Biochemistry and Biophysics*, vol. 508, no. 2, pp. 152–158, 2011.
53. Geller AC, Elwood M, Swetter SM, Brooks DR, Aitken J, Youl PH, et al. Factors related to the presentation of thin and thick nodular melanoma from a population-based cancer registry in Queensland Australia. *Cancer* 2009; 115:1318-1327.
54. Wang ZY, Huang MT, Ho CT, et al. Inhibitory effect of green tea on the growth of established skin papillomas in mice. *Cancer Res* 1992; 52:6657-65.
55. H.-K. Park, D.-W. Han, Y. H. Park, and J.-C. Park, “Differential biological responses of green tea polyphenol in normal cells vs. cancer cells,” *Current Applied Physics*, vol. 5, no. 5, pp. 449–452, 2005
56. <https://www.cancer.net/cancer-types/skin-cancer-non-melanoma/view-all>
57. Andreia Granja, Iúri Frias, Ana Rute Neves, Marina Pinheiro, and Salette Reis, Therapeutic Potential of Epigallocatechin Gallate Nanodelivery Systems, *Biomed Res Int.* 2017; 2017:1-15.
58. Stalmach A, Troufflard S, Serafini M, Crozier A. Absorption, metabolism and excretion of choladi green tea flavan-3-ols by humans. *Mol Nutr Food Res* 2009;53 Suppl 1:S44.